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Substitute for form 1449/PTO			Complete if Known			
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INFORMATION DISCLOSURE			Filing Date	10/01/2004		
			First Named Inventor	Striuli		
STATE	MENT BY	APPLICANT	Art Unit	2683		
(Use as many sheets as necessary)			Examiner Name	Cumming		
hoet [1	Of.	1	Attorney Docket Number	METRO730US		

Examiner	Cite	Document Number	U. S. PATENT	Name of Patentse of	Pagas, Columns, Lines, Where
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	City No.	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pagas, Columna, Linea, Where Relevant Passages Or Relevant Figures Appear	Γ
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Examiner Signature	1111/1///	Dete Considered	6/2/1/16
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